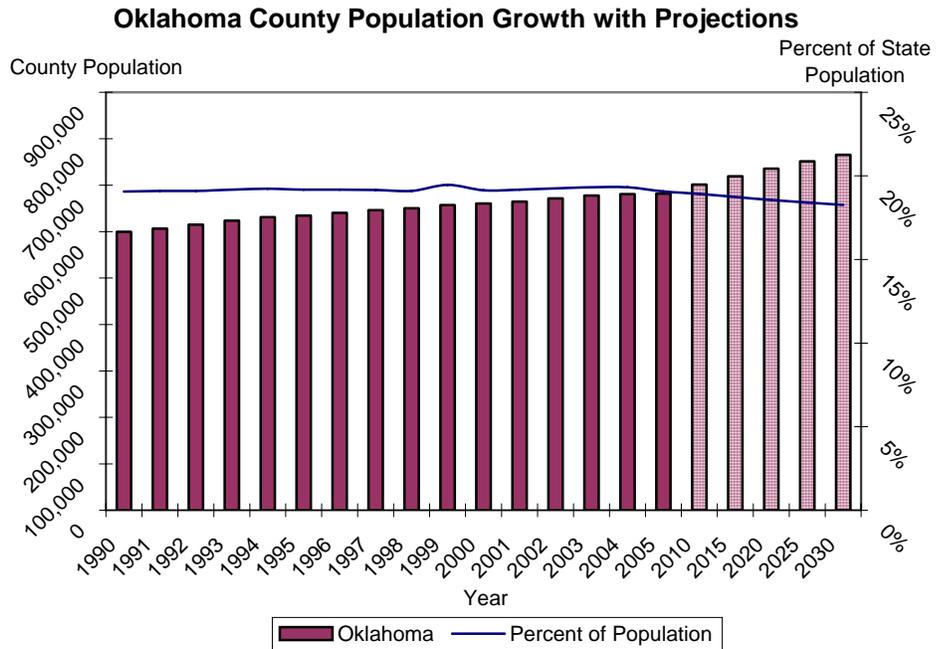


Demographics

- Population estimates
 - 10% increase from 1990 to 2000 (599,611 to 660,448)
 - 3% increase from 2000 to 2004
 - Ranked 15th for growth in state
- 2000 Census
- Hispanic/Latino ethnicity = 9%
- Race
 - Whites = 70%
 - Native Americans = 3%
 - Blacks = 15%
 - Other/Multiple = 11%
- Age
 - Under 5 = 7%
 - Over 64 = 12%
 - Median age = 34.2 years
- Housing units
 - Occupied = 266,834 (90%)
 - Vacant = 28,186 (10%)
- Disability (ages 21 to 64) = 21.7% national = 19.2% state = 21.5%
- Individuals below poverty = 15.3% national = 12.4% state = 14.7%



* *Vital Statistics, Health Care Information Systems, OSDH & Centers for Disease Control*

Top 10 Leading Causes of Death

The top 10 leading causes of death table on the next page displays a broad picture of the causes of death in Oklahoma County. Since many health-related issues are unique to specific ages, this table provides causes of death by age group at a glance. The causes of death that are present across almost every age group have been highlighted. From 1983 to 1993 heart disease killed 19,162 people in Oklahoma County

and is still the leading cause of death among all age groups. According to the Centers for Disease Control, almost \$400,000 is spent on each heart disease-related death. With an average of 1895.5 deaths a year, heart disease accounts for over \$701 million a year in medical costs

**Heart disease
accounts for over
\$701 million a year
in medical costs in
Oklahoma County.**

in Oklahoma County. Alzheimer's disease and the complications associated with it have increased from the 13th ranked cause of death (1983-1993) to the 8th ranked cause of death in persons 65 and older accounting for a 264% increase in deaths.

* *Behavioral Risk Factor Surveillance System, Health Care Information System, OSDH & Health Affairs Journal, R. Strum, 2002*

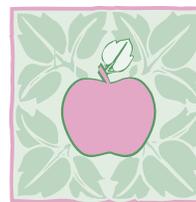
Nutrition and Obesity

With the United States coming in as the most obese country in the world, health care costs related to obesity and poor nutrition are on the rise.

Of the 292 million people in the United States, 129 million are overweight or obese according to their body mass index (BMI). The number of obese (BMI > 29) and overweight (BMI 25-29) Oklahomans has been increasing at the

same rate as the nation, and health care costs are reflecting this downward spiral of health. For persons under the age of 65, on average, health care costs are \$395 more for obese individuals and are even greater for persons over the age of 65.

In 2002-2004, 22.5%



**Sensible Foods – Sensible Portions
5 to 9 Fruits & Vegetables
a Day**

(152,115) of people in Oklahoma County were considered obese which accounted for an additional \$60,085,425 in medical costs for the county. These costs are underestimated because they do not take into account the percentage of obese or overweight persons who are over the age of 65.

Top 10 Causes of Death by Age Group Oklahoma County 1993-2003

Rank	0-4	05-14	15-24	25-34	35-44	45-54	55-64	65+	All Ages
1	PERINATAL PERIOD 485	UNINTENT. INJURY 77	UNINTENT. INJURY 357	UNINTENT. INJURY 325	HEART DISEASE 487	CANCER 1259	CANCER 2465	HEART DISEASE 16639	HEART DISEASE 20863
2	CONGENITAL ANOMALIES 245	CANCER 35	HOMICIDE/LEGAL 216	SUICIDE 225	CANCER 476	HEART DISEASE 1252	HEART DISEASE 2276	CANCER 9800	CANCER 14226
3	SIDS 93	CONGENITAL ANOMALIES 19	SUICIDE 170	HOMICIDE/LEGAL 183	UNINTENT. INJURY 423	UNINTENT. INJURY 331	BRONCHITIS/EMPHYSEMA/ASTHMA 416	STROKE 4281	STROKE 5021
4	UNINTENT. INJURY 92	HOMICIDE/LEGAL 17	CANCER 45	HIV 176	SUICIDE 258	STROKE 221	STROKE 348	BRONCHITIS/EMPHYSEMA/ASTHMA 3034	BRONCHITIS/EMPHYSEMA/ASTHMA 3597
5	HOMICIDE/LEGAL 51	SUICIDE 14	HEART DISEASE 43	CANCER 127	HIV 242	LIVER DISEASE 210	DIABETES 236	INFLUENZA/PNEUMONIA 1693	UNINTENT. INJURY 2760
6	HEART DISEASE 35	HEART DISEASE 11	BRONCHITIS 14	HEART DISEASE 108	HOMICIDE/LEGAL 162	SUICIDE 176	UNINTENT. INJURY 210	DIABETES 1250	INFLUENZA/PNEUMONIA 1946
7	SEPTICEMIA (BLOOD POISONING) 18	BRONCHITIS 6	STROKE 9	STROKE 22	STROKE 127	DIABETES 131	LIVER DISEASE 166	UNINTENT. INJURY 941	DIABETES MELLITUS 1711
8	INFLUENZA/PNEUMONIA 15	SEPTICEMIA (BLOOD POISONING) 6	NON-CANCEROUS Tumor 8	DIABETES MELLITUS 18	LIVER DISEASE 120	HIV 111	SEPTICEMIA (BLOOD POISONING) 103	ALZHEIMER'S DISEASE 858	SUICIDE 1099
9	CANCER 15	INFLUENZA/PNEUMONIA 4	CONGENITAL ANOMALIES 8	INFLUENZA/PNEUMONIA 17	DIABETES 67	HOMICIDE/LEGAL 105	SUICIDE 103	ATHEROSCLEROSIS 843	KIDNEY DISEASE 919
10	KIDNEY DISEASE 14	STROKE 3	DIABETES 8	SEPTICEMIA (BLOOD POISONING) 15	INFLUENZA/PNEUMONIA 41	BRONCHITIS/EMPHYSEMA/ASTHMA 87	INFLUENZA/PNEUMONIA 99	KIDNEY DISEASE 769	SEPTICEMIA (BLOOD POISONING) 896

Data source: *Vital Statistics*, Health Care Information Division, Oklahoma State Department of Health
 Produced by: Community Development Service, Community Health Service, Oklahoma State Department of Health

Injury and Violence

Across the nation and the state of Oklahoma, unintentional and violence-related injuries are on the rise. Unintentional injuries account for the 4th leading cause of death in the United States and the 5th leading cause of death in Oklahoma from 1999-2002. For persons ages 1 to 44 in Oklahoma, unintentional injuries are the leading cause of death.

This trend does not change much in Oklahoma County. Unintentional injuries are the leading cause of death from ages 5 to 34.

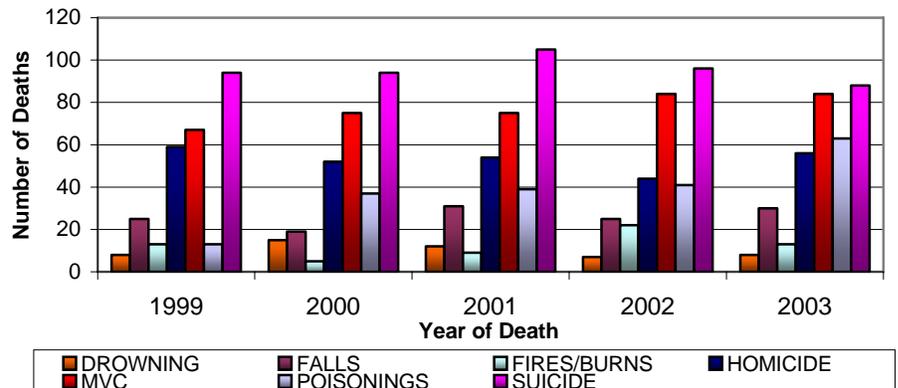
It is estimated that for every motor vehicle-related death \$1.1 million in economic costs are incurred. For Oklahoma County which has an average of 77 motor vehicle-related deaths a year,

that translates to over \$86 million a year.

Violence-related injuries (homicide

and suicide) in Oklahoma County are ranked in the top 10 in seven of the eight age groups (see Top 10 list on page 3).

Injury and Violence-Related Deaths in Oklahoma County, 1999 - 2003



* *Vital Statistics*, Health Care Information Systems, OSDH & Centers for Disease Control

Tobacco Use

According to the 2005 State of the State's Health Report, tobacco use among Oklahomans has remained fairly stable from 1990 to 2002. Oklahoma has been consistently higher in its tobacco use than the nation and is 30% higher than the nation on the amount of tobacco consumed per capita (103 packs vs. 79 packs).

Tobacco use is no longer just the

problem of the individual but also the community as a whole. With health care costs on the rise, targeting areas such as tobacco use is an effective way to control those costs.

In 2002, the CDC estimated that a person that used tobacco accrued over \$3,300 in health care costs per year. According to the Be-

havioral Risk Factor Surveillance Sys-

tem, it is estimated that 24.4% (164,960) of people in Oklahoma County use tobacco of some sort. Medical costs accumulated by those persons are over \$544 million a year for Oklahoma County.

“Medical costs accumulated by those persons are over \$544 million a year for Oklahoma County”

* *Behavioral Risk Factor Surveillance System*, Health Care Information System, OSDH & American Diabetes Association, 2002

Physical Activity, Wellness and Diabetes

The increasing inactivity of the U.S. population is contributing to an increase in numerous poor health-related outcomes. Physical inactivity robs the body of precious energy needed to function properly, in turn health declines and rates of various chronic diseases escalate.

According to the 2002-2004 Behavioral Risk Factor Surveillance System (BRFSS), it is estimated that 28.3%

(191,327) of people in Oklahoma County had no leisure activity in the past month at the time they were surveyed.

The BRFSS also indicated that 6.1% (41,240) of Oklahoma County citizens have been diagnosed by a health professional as hav-



Increase activity gradually. Moderate exercise for 30 minutes 5 days a week.

ing diabetes. In 2002, the per capita annual healthcare costs for people with diabetes was \$13,243 compared to \$2,560 for people without diabetes. Persons with diabetes accumulated health care costs of \$546,141,320.00 in one year for Oklahoma County.

Teen Pregnancy

While births to teen mothers (age 15 to 19) are on the decline in both the U.S. and Oklahoma, Oklahoma has moved up in rank from 13th to 8th in the country. In 1993 the rate of teen births

was 60.0 (per 1,000 15-19 year old females) in the U.S. and 66.6 in Oklahoma. In 2003, the rate decreased to 41.7 in the U.S. and 55.8 in Oklahoma, a decrease of

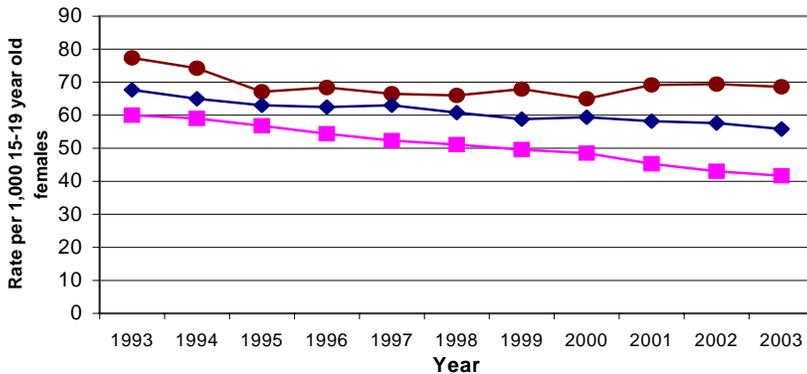
31% and 7%, respectively.

Children of teen mothers are more likely to display poor health and social outcomes than those of older mothers, such as premature birth, low birth weight, higher rates of abuse and neglect, and more likely to go to foster care or do poorly in school. Additionally, births to teen mothers accumulate \$3,200 a year for each teenage birth, which is passed on to citizens.

According to Oklahoma Vital Statistics, Oklahoma County had a teen birth rate of 68.6 in 2003 which was a 1% decrease from 2002 (69.4) and a 11% decrease since 1993 (77.4).

With an average of 1579 births per year, teen pregnancy costs the citizens of Oklahoma County \$5,052,800.00 a year.

Rate of Live Births to Teen Mothers Ages 15-19, Oklahoma County, 1993 to 2003



*2003 U.S. data is preliminary

—●— Oklahoma —◆— Oklahoma —■— U.S.*

Note: 392 births to a mother 10-14 years of age occurred during the 11 year period.

Poverty

* U.S. Census Bureau

As the nation advances in technology and the ability to detect and prevent disease at an earlier stage, persons that are impoverished carry a large burden of poor health outcomes. Higher incidences of unplanned or unwanted pregnancies, teen pregnancy, inade-

quate prenatal care, higher rates of low-birth-weight babies, infant deaths and low immunization rates are all associated with poverty along with a myriad of other adverse health outcomes.

According to the 2000 census, 15.3% of persons in Oklahoma

County for whom poverty status was known had an income below what was needed to live at the federal poverty level. Oklahoma County is 4% above the state (14.7%) and 23% above the nation (12.4%) for persons with incomes below the federal poverty level.

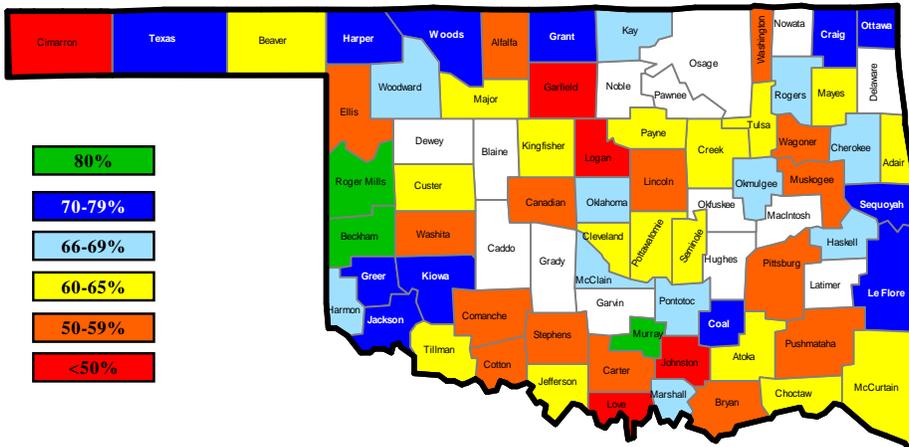
Income to Poverty Ratio, Oklahoma County, 2000 Census

Poverty level	Total	50% below	51% to 99% below	poverty level to 149% above	150% to 199% above	200% and above
Population	643,433	45,669	52,476	66,825	64,269	414,194
Cumulative Population		45,669	98,145	164,970	229,239	643,433
% of Total	100.0%	7.1%	8.2%	10.4%	10.0%	64.4%
Cumulative %		7.1%	15.3%	25.6%	35.6%	100.0%

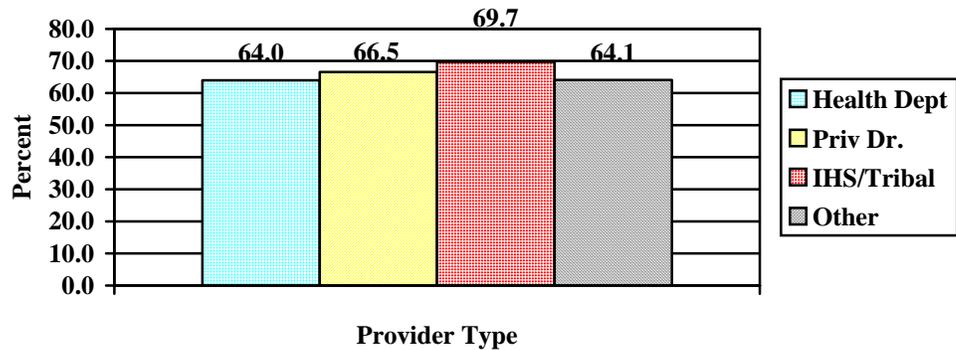
OK By One - State Immunization Data

* 2 Year-old Immunization Survey, Immunization Service, OSDH

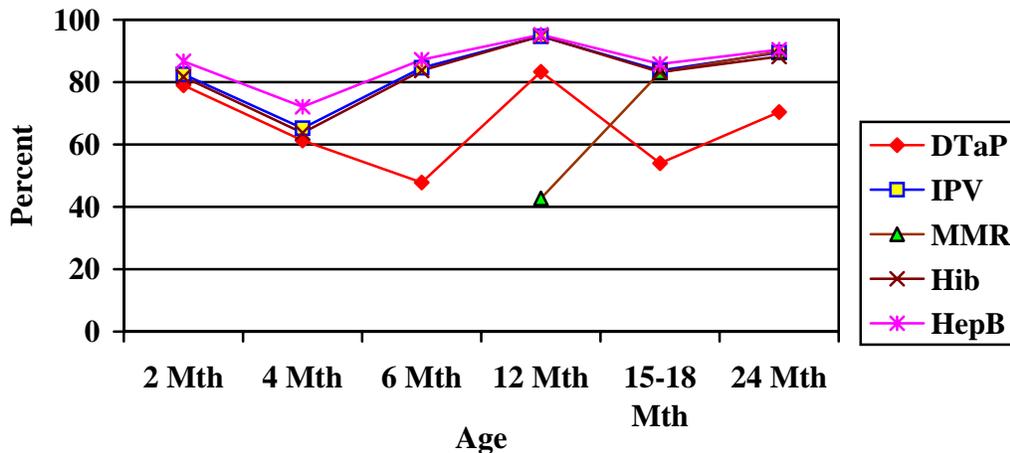
2003-04 Immunization Coverage Rates



4:3:1:3:3 Coverage by Location of Shots, Oklahoma, 2004



Oklahoma Children On Schedule by Antigen, 2004



**Note: County level data will be available soon.

County Health Department

Through Community Resources Development, OCCHD works with organizations in Oklahoma County to:

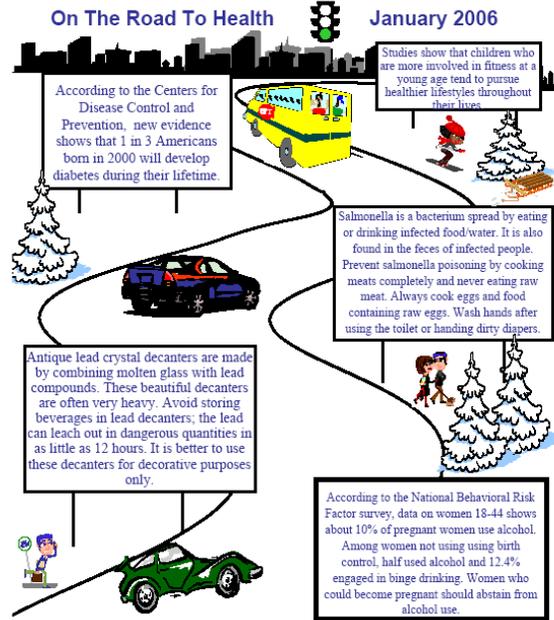
- Raise awareness of public health issues in community groups
- Identify difficulties people have in finding and using health care
- Assist community leaders in identifying Oklahoma's health care needs and in finding resources to meet those needs
- Educate policymakers about problems Oklahoma families face and recommend solutions to meet those needs.
- Educate the public on a variety of health issues.

For more information: 419-4247

For the latest copy of **On The Road To Health:**

<http://www.cchdoc.com/Community%20Resources.htm>

On The Road To Health  **January 2006**



According to the Centers for Disease Control and Prevention, new evidence shows that 1 in 3 Americans born in 2000 will develop diabetes during their lifetime.

Studies show that children who are more involved in fitness at a young age tend to pursue healthier lifestyles throughout their lives.

Salmonella is a bacterium spread by eating or drinking infected food/water. It is also found in the feces of infected people. Prevent salmonella poisoning by cooking meats completely and never eating raw meat. Always cook eggs and food containing raw eggs. Wash hands after using the toilet or handling dirty diapers.

Antique lead crystal decanters are made by combining molten glass with lead compounds. These beautiful decanters are often very heavy. Avoid storing beverages in lead decanters; the lead can leach out in dangerous quantities in as little as 12 hours. It is better to use these decanters for decorative purposes only.

According to the National Behavioral Risk Factor survey, data on women 18-44 shows about 10% of pregnant women use alcohol. Among women not using birth control, half used alcohol and 12.4% engaged in binge drinking. Women who could become pregnant should abstain from alcohol use.

HEALTH
Prevent. Promote. Protect.

On the Road to Health is brought to you by the Oklahoma City-County Health Department, 921 N.E. 23rd St., Oklahoma City, OK 73105. Created by Laura Brennan. Sources available upon request. To receive additional copies, or to subscribe to this FREE publication, call (405) 419-4247 or email Katrina_Warden@CCHDOC.org

Health Care Costs Summary

Cardiovascular Disease (Heart Disease)

- Average 1896 deaths a year
- \$369,476.69 per death
- Total— \$700,527,804.24 a year

Obesity

- 22.5% of population (152,115)
- \$395.00 in additional medical costs per person
- Total—\$60,085,425.00



Motor Vehicle-Related Injury Death

- Average 77 deaths per year
- \$1,120,000.00 in economic costs per death
- Total—\$86,240,000.00 a year

Tobacco Use

- 24.4% of population (164,960)
- \$3,300.00 in health care costs
- Total—\$544,368,000.00 a year

Diabetes

- 6.1% of population (41,240)
- \$13,243.00 in healthcare costs a year
- Total—\$546,141,320.00 a year

Teen Pregnancy

- Average of 1579 births to teen mothers per year
- \$3,200.00 in costs for each birth a year
- Total— \$5,052,800.00 a year

Grand Total for Oklahoma County:

\$1,942,415,349.24



**OKLAHOMA STATE
DEPARTMENT OF HEALTH**

Community Health Services
Community Development Service

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Oklahoma County Health Department

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405-427-8651

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***A Look Back
To Move Forward***

Report compiled by:
Miriam McGaugh, M.S.
Community Development Service, OSDH
Kelly Baker, MPH
Health Care Information Systems, OSDH

The Oklahoma Turning Point Initiative is public health improvement in action. The success of the Turning Point process involves a partnership between the state and county departments of health, local communities, and policy-makers. The Oklahoma Turning point engine is fueled by a community-based decision making process whereby local communities tap into the capacities, strengths, and vision of their citizens to create and promote positive, sustainable changes in the public health system, and the public's health.

*Thank you Central Oklahoma
Turning Point!*



*Oklahoma Community Partners
in Public Health Innovation*